

SERIAL NUMBER 09/191,757	FILING DATE 11/13/98	CLASS 395 717/2	GROUP ART UNIT 2762 2122	ATTORNEY DOCKET NO. 777.174US1
-----------------------------	-------------------------	----------------------------------	---	-----------------------------------

APPLICANT SHANKAR VAIDYANATHAN, REDMOND, WA; PHILIP LUCIDO, REDMOND, WA; SUNDEEP BHATIA, REDMOND, WA.

****CONTINUING DOMESTIC DATA*******

VERIFIED

none all

****371 (NAT'L STAGE) DATA*******

VERIFIED

all

****FOREIGN APPLICATIONS*******

VERIFIED

none all

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/01/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 8	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 4
Verified and Acknowledged Examiner's Initials <u>AC</u> Initials <u>AC</u>					

SEE CUSTOMER NUMBER: 021186

ADDRESS	
TITLE	AUTOMATED HELP INFORMATION

FILING FEE RECEIVED \$1,310	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of ' <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	---	---

SERIAL NUMBER 09/191,757	FILING DATE 11/13/98	CLASS 395 217/2	GROUP ART UNIT 2762 2122	ATTORNEY DOCKET NO. 777.174US1
-----------------------------	-------------------------	-----------------------	--------------------------------	-----------------------------------

APPLICANT

SHANKAR VAIDYANATHAN, REDMOND, WA; PHILIP LUCIDO, REDMOND, WA; SUNDEEP GHATIA, REDMOND, WA.

CONTINUING DOMESTIC DATA***

VERIFIED

none

371 (NAT'L STAGE) DATA***

VERIFIED

no

FOREIGN APPLICATIONS***

VERIFIED

none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/01/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 8	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 4
Verified and Acknowledged Examiner's Initials _____			Initials _____			

SEE CUSTOMER NUMBER: 021186

ADDRESS

TITLE

* AUTOMATED HELP INFORMATION SYSTEM for Reference Information

FILING FEE RECEIVED \$1,310	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	---	---